

# Bringing Boston Home

An Action Plan To House  
Boston's Homeless  
2013-2016

Prepared By  
The City of Boston  
Leadership Council On Homelessness



Thomas M. Menino, Mayor  
City of Boston

# City of Boston

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Dear Friends:

Over the past twenty years, I have had the honor to work alongside a dedicated, tireless, and inspiring community of people who care deeply about our homeless Bostonians. This partnership, combined with good policy and planning, has done so much to address the needs of our citizens.

This community has helped Boston's homeless population by helping people get off the street, caring for their medical and mental health needs, building permanent homes for them, and providing the kind of services that not only help them obtain homes, but retain them as well.

But this is not enough. We can not rest until every Bostonian has a place to call home.

The Leadership Council on Homelessness has been an invaluable partner to the City in helping us think about what comes next. In these pages, we have outlined the key goals that we need to achieve by the end of 2016.

While Boston has had great success in reducing homelessness, I commend the Leadership Council for having the courage to take on some of the most difficult remaining issues faced by Boston's homeless population:

- Helping our most challenged and medically frail homeless off the street - and then helping them stay off the street;
- Making sure that the mentally ill, ex-offenders, and youth don't wind up in shelter;
- Helping families in subsidized housing keep their homes, even when unexpected circumstances make it hard to pay rent.

These are just a few of the important goals the Leadership Council has set for us. We must commit to these goals; we cannot afford to do less for the most vulnerable of our citizens.

The street is no place to call home. I hope that every single person reading this report will commit to continue this crucial work until it is done.

Sincerely,

A handwritten signature in black ink, reading "Thomas M. Menino". The signature is fluid and cursive, with the first name "Thomas" being the most prominent.

Thomas M. Menino, Mayor  
City of Boston

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For more than 30 years, the City of Boston, the Commonwealth of Massachusetts, and a network of non-profit service providers have cooperated to deliver one of the most comprehensive, and effective, anti-homelessness strategies in the nation.

Compared to other cities its size, Boston has an extremely small number of unsheltered homeless people on our streets: nearly 97% of Boston's homeless are sheltered. We can be proud that this is the highest sheltering rate in the nation. (Appendix 1)

But shelter is not the ultimate solution. We must put into place new and improved strategies that will result in better, more permanent outcomes -- and we must do so in the face of continued deep cuts in precious resources, such as the tremendous cuts seen by the Boston Housing Authority's Housing Voucher Program.

Over the years, experience has shown that the best results almost always occur when the City and the homeless service community cooperatively focus their efforts around key subpopulations for extended periods.

When that focused attention is backed up with the strategic allocation of resources, coupled with clear and measurable targets, real progress can be made. This formula will be central to Boston's strategy going forward.

For the period 2013 through 2016, the City will engage with the provider community as well as State, Federal and Philanthropic resource providers to make meaningful progress in seven key areas:

- 1. Street Homelessness**
- 2. HUES to Home**
- 3. Homeless Individuals in Shelter**
- 4. Reducing Unnecessary Shelter Placements**
- 5. Family Homelessness**
- 6. Workforce Development**
- 7. Homeless Housing Production**

## 1. Street Homeless

At the end of 2012, the City of Boston's Homeless Census counted 193 people living on the street. While that total is very small compared to other cities, we believe that we can get that count even lower. Within this population is a group of vulnerable individuals who are persistently unsheltered, despite the availability of shelter beds for all who need one. Vulnerable individuals include seniors, unaccompanied youth, persons with chronic substance abuse and/or mental and physical disabilities, as well as homeless veterans.

**The goal for Street Homelessness is:**

**To reduce by 50% the number of vulnerable individuals who are persistently unsheltered, by 2016. Currently, there are 150 vulnerable individuals who are persistently unsheltered.**

**To achieve this goal, we will:**

- ➡ Undertake a street homeless assessment to identify the most vulnerable individuals who are persistently on the streets
- ➡ Develop and execute an individualized sheltering/housing strategy for each person to get them into appropriate shelter/transitional housing and ultimately, permanent housing
- ➡ Reassess and modify the list as needed at the end of each fiscal year, based upon the identification of the most vulnerable individuals on the street

### **Achieving this goal will require the following partners:**

- ➞ Shelter providers and outreach workers
- ➞ Boston Public Health Commission/Emergency Shelter Commission, State Department of Mental Health (DMH), Department of Public Health (DPH), Veterans Affairs (VA) and Boston Health Care for the Homeless' street teams, and medical respite provider programs
- ➞ Public Health and Safety agencies that regularly interact with the street homeless including Boston Emergency Medical Services (EMS), the Boston Police Department (BPD), the Massachusetts State Police, and the Boston Park Rangers
- ➞ Housing providers, including the Boston Housing Authority (BHA), the Metropolitan Boston Housing Partnership (MBHP), and homeless set-aside unit operators
- ➞ Transitional housing and supportive shelter operators, including substance abuse recovery homes, mental health treatment programs, transitional housing programs, medical respite and recovery homes



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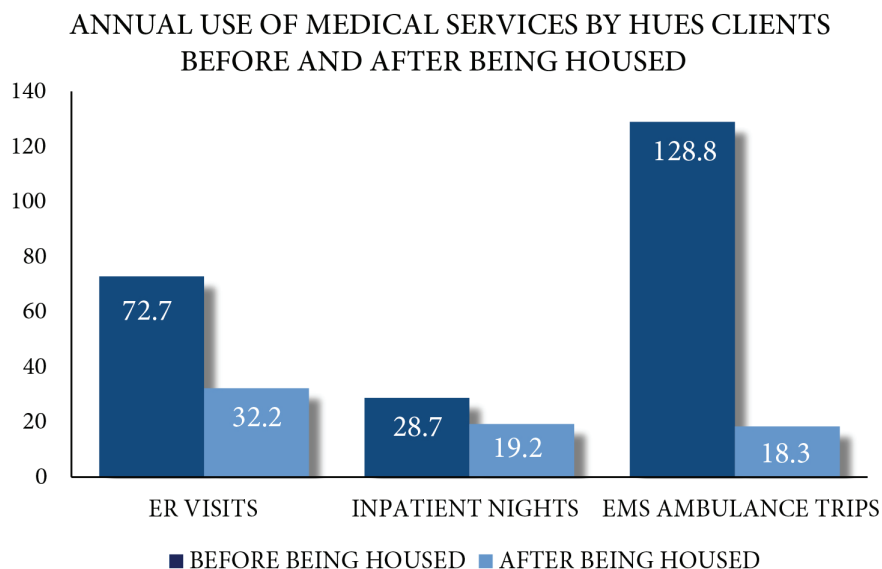
## 2. HUES to Home

The High Utilizers of Emergency Services (HUES) program has identified 80 homeless individuals who use Boston hospital emergency rooms as a regular shelter option and health care provider. These individuals are among the most medically fragile, and by far the most costly, subset of Boston's homeless population in terms of health care costs.

Finding permanent supportive housing options for these individuals can produce vastly improved health outcomes as well as drastically reducing the costs of care. Since this initiative began in 2010, it has housed 41% of this identified cohort. Housing and supportive services resulted in a 56% reduction in Emergency Department visits, a 33% reduction in hospital stays, and a tenancy retention rate of 88%.

**The HUES to Home goal is:**

**To house 80 HUES individuals by 2016.**





### **To achieve this goal, we will:**

- ➞ Identify HUES clients through Mass Health data reports and by referral from partnering hospitals
- ➞ Continue with outreach and engagement strategies to identified clients
- ➞ Execute strategies to place as many individuals as possible into appropriate permanent supportive housing on a priority basis
- ➞ Track emergency services usage (Emergency Departments/inpatient settings and Boston EMS) before and after placement in permanent housing
- ➞ Fundraise from the philanthropic and medical community to provide medical and support services to ensure that once housed, clients are able to retain both their health and their housing

### **Achieving this goal will require the following partners:**

- ➞ Boston Public Health Commission, Boston Health Care for the Homeless Program, Massachusetts Housing and Shelter Alliance, Boston area hospitals
- ➞ The Boston Housing Authority and property owners of permanent housing
- ➞ Massachusetts Department of Housing and Community Development (DHCD) and the City's Department of Neighborhood Development (DND)
- ➞ Medically-related foundations



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### 3. Homeless Individuals in Shelter

The City recognizes that there will always be a need for an emergency shelter system as an essential part of the social safety net of a compassionate city. Emergency shelter is a system designed for short-term emergencies that too often serves other purposes for which it was never designed. For example, it was never designed as a long-term housing solution for people who present significant challenges that impede placement into more suitable housing; it was not designed to be the homeless solution for people coming from other regions of the State; it was not designed as a solution for institutions discharging their clients into homelessness.

Yet, Boston's shelters are asked to do all of these things and more. Enabling the City's shelters to focus more resources on their core mission and less on these other functions is a high priority for the City going forward.

#### Long-Term Homeless

Since 2009, Boston's largest shelter providers, the Boston Public Health Commission and Pine Street Inn, have successfully undertaken a sustained effort to reduce the number of people who are in shelter for more than a year. The number of long-term homeless individuals in Boston has declined by 23%: from 569 in 2009 to 439 at the end of 2012 (Appendix 2).

Despite the fact that many of the remaining long-term stayers are among the hardest to place, the City believes that with a sustained effort and enhanced outplacement strategies, this number can go even lower.

**The goal for Long-Term Homelessness is:**

**To further reduce the number of long-term homeless in Boston's shelters by 50 percent, reducing long-term homeless from 439 to 220 by 2016.**

**To achieve this goal, we will:**

- ➔ Review and adjust shelter policies and practices with providers to eliminate disincentives that keep long-term stayers from moving to permanent supportive housing
- ➔ Create low threshold congregate-type housing for some long-term stayers, e.g., veterans with physical/mental disabilities, the elderly, and those with a history of chronic substance abuse
- ➔ Realign the use of existing resources and fundraise for new sources to provide housing with services to ensure that recently-housed clients retain their housing
- ➔ Continue to apply for housing subsidies through HUD Continuum of Care funds. To date, the City has secured more than 400 subsidies for homeless individuals moving from emergency shelter to permanent housing (See Appendix 3)

**Achieving the goal will require the following partners:**

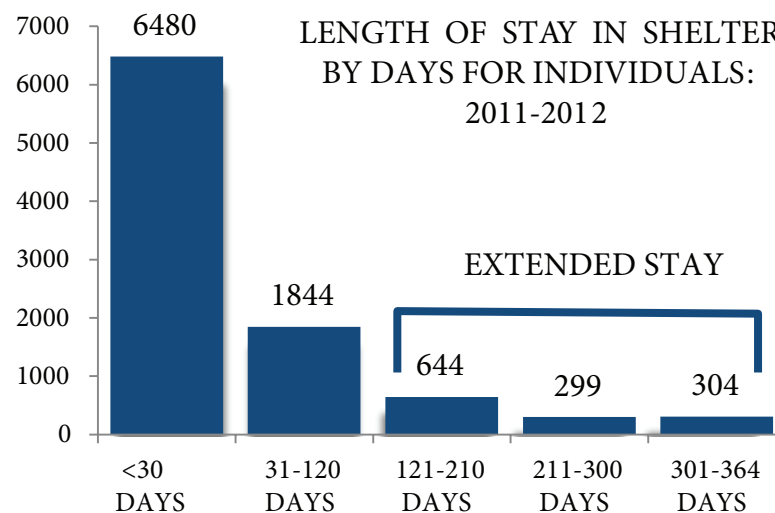
- ➔ Shelter providers implementing incentives to encourage out placement of the long-term homeless
- ➔ State & City social service providers, including Boston Public Health Commission, DMH,VA, Department of Public Health, Department of Corrections (DOC) and the Suffolk County Sheriff's Office
- ➔ Housing providers including BHA, MBHP and Homeless set-aside unit operators
- ➔ Housing support service providers, especially for the hard-to-house and persons with complex behavioral health and other social service needs

### 3. Homeless Individuals in Shelter, *cont.*

#### Extended-Stay Shelter Populations

Of the almost 10,000 individuals who enter one of Boston's shelters over the course of a year, a majority (68%) are able to exit the system in less than 30 days and with relatively little assistance. There are, however, those who require more assistance if they are not to become one of the long-term homeless.

Shelter providers generally observe that if someone has been in shelter for more than four months, they become increasingly unlikely to house themselves without additional assistance. These extended-stay (120-364 day) residents represent only 12% of the individuals using shelter in a year, but utilize 52% of the shelter system's annual capacity.



By focusing its rapid re-housing assistance toward these shelter residents, it is possible to not only prevent long term homelessness, but also to reduce some of the demands on the City's shelter system. Veterans, in particular, have access to additional services that if properly utilized, can facilitate this rapid re-housing strategy. With rapid re-housing assistance (e.g., move-in expenses) being much less costly than many options used for the long-term homeless (e.g., permanent supportive housing) this strategy is substantially more cost-effective over the long run.

**The goal for the Extended Stay population is:**

**To reduce by 25% the average length of stay for this shelter population by 2016.**

**To achieve this goal, we will:**

- ➔ Identify and engage with all extended-stay shelter residents
- ➔ Develop and execute strategies, including rapid re-housing, to house these individuals as quickly as possible
- ➔ Reapportion City and other existing rapid re-housing resources, as well as any new sources that may be obtained, based on the specific needs identified in those strategies

**Achieving the goal will require the following partners:**

- ➔ Shelter providers
- ➔ Public/private funders of rapid re-housing services
- ➔ Developers and owners of affordable housing especially those with homeless set-aside units



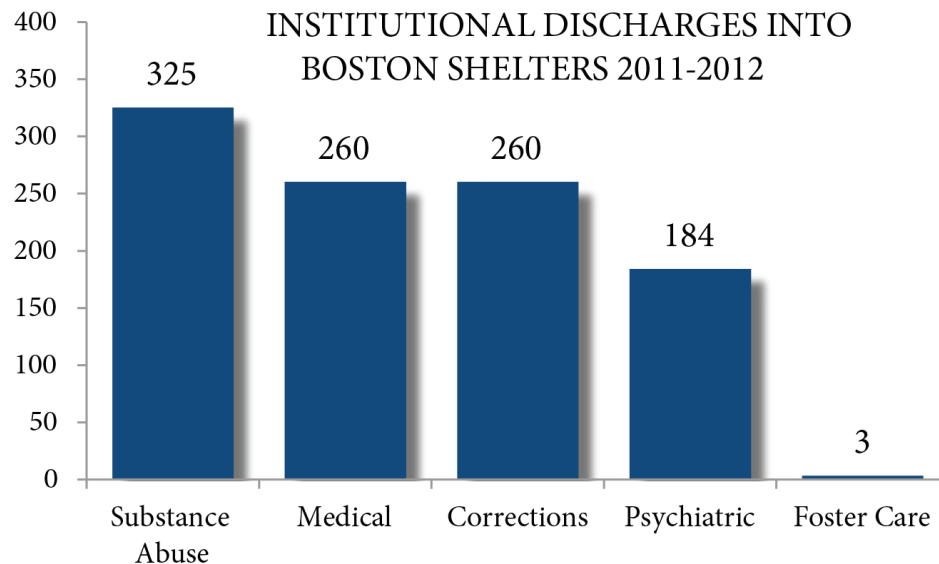
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## 4. Reducing Unnecessary Shelter Placements

Boston's shelters should be the housing option of last resort, but they are often used as a housing solution for institutions or communities without housing solutions of their own. These feeder systems need to be better managed and coordinated with Boston and its shelters to prevent as many unnecessary shelter placements as possible.

### Discharges from Federal/State/County Systems of Care and Private Hospitals

The State's criminal justice and social service systems can generate demand for emergency shelter in Boston, especially when people are released from institutional settings without sufficient housing support. The City, the provider community, and State and Federal agencies must work together to better manage discharges from these institutional settings.



**The goal for this population is:**

**To develop and execute shelter diversion agreements with key Federal and State institutions, prioritizing veterans, the mentally ill, ex-offenders, and youth in order to reduce the number of discharges directly from institutions to emergency shelter.**

**To achieve this goal, we will:**

- Undertake an analysis of which State/Federal systems are generating the greatest number of shelter placements, particularly extended-stay placements, including quantification of the number of discharges from institutions of care to emergency shelter
- Engage with those systems that are the biggest sources of new entry or re-entry into the City's homeless shelter system and execute formal agreements regarding outplacement of their clients with a priority toward diverting clients from shelter

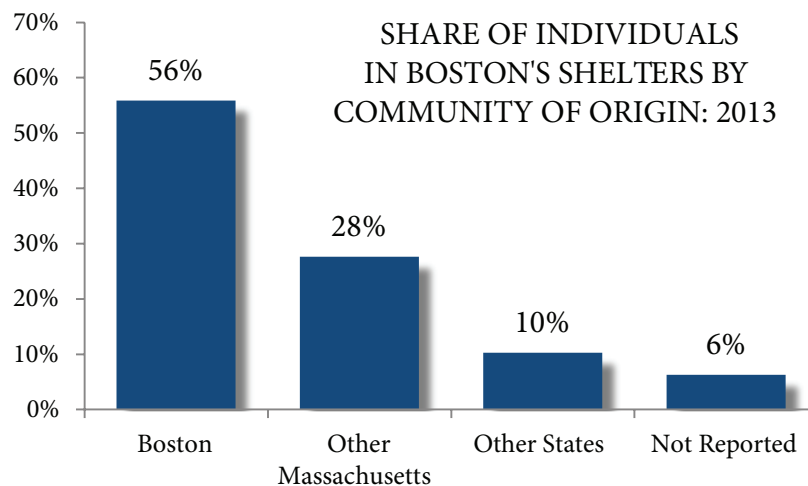
**Achieving the goal will require the following partners:**

- Shelter providers
- State/Federal agencies including DMH, DOC, Veterans Affairs

## 4. Reducing Unnecessary Shelter Placements, *cont.*

### Placements from Outside Boston

In their most recent analyses, Boston's single adult emergency shelters report that nearly 40% of their guests had their last permanent address outside the city.



Inadequate regional services, and limited pathways to housing, result in a disproportionate share of the region's homeless individuals depending upon, and putting strains on, the City's homeless service systems.

While the City will not simply turn away non-residents who are looking for emergency shelter, there needs to be greater coordination, cooperation and commitment regionally to limit the utilization of City shelters by people from outside Boston and Massachusetts. Boston will work to help these individuals get back to their communities of origin where they may have more support.



**The goal for this issue is:**

**To establish, with State backing, a Regional Sheltering Cooperation Policy that facilitates greater sheltering of the homeless in their communities of origin.**

**To achieve this goal, we will:**

- ➡ Develop and implement shelter intake policies in partnership with Boston single adult emergency shelters that will encourage non-Boston residents to seek shelter closer to their community of origin
- ➡ Develop systems to move non-residents closer to their communities of origin

**Achieving the goal will require the following partners:**

- ➡ Shelter providers throughout greater Boston
- ➡ State and Federal authorities that fund shelter programs



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## 5. Family Homelessness

While sheltering homeless families is primarily a State function, the City can employ a number of strategies to enhance the State's efforts in some critical areas.

### Reduce Unnecessary Evictions

The eviction of subsidized tenants is one of the key components in unnecessarily generating family homelessness. Once a family loses a rent subsidy due to an eviction, they are no longer eligible for subsidy, which makes it vastly harder for them to become permanently housed. Studies conducted by Project HOPE and One Family Inc. in 2011 and 2012 reviewed Housing Court data from 2010 and 2011. These studies showed that 56% of the 2,127 evictions in 2010 were evictions of tenants with rent subsidies and 52% of 2,064 evictions in 2011 were evictions of tenants with rent subsidies.

In 2010, the average subsidized tenant had an arrearage of only \$1,552; in 2011, the average was \$1,670. The cost of repairing that delinquency is a fraction of what it will cost the State for emergency housing if that family becomes homeless. While some evictions were certainly for reasons not exclusively related to rent arrearages, many were, and those evictions should be preventable.

**The goal for Family Homelessness is:**

**To reduce by 25% the number of families with housing subsidies who are evicted solely for rent arrearages by the end of 2016.**

**To achieve this goal, we will:**

- ➞ Update the Evictions Study, enumerating how many families with rent subsidies were evicted solely for reasons of rent delinquencies, and identify which housing providers are most aggressively pursuing these evictions
- ➞ Establish and execute eviction intervention agreements with these providers that enable the tenant, with City assistance, to address the delinquencies with non-eviction options
- ➞ Set additional targets for FY15 and FY16, based on experience gained in the first year (FY14)
- ➞ Realign the use of existing City-controlled resources and commit to fundraise from private, public and philanthropic organizations as well as the legal community to support dedicated staff who will provide direct services to these clients

**Achieving the goal will require the following partners:**

- ➞ Boston Housing Court to facilitate non-eviction solutions
- ➞ Existing non-profit provider agencies that operate homelessness prevention programs, particularly those that operate programs in Boston Housing Court
- ➞ Subsidized housing providers and management companies, including BHA and MBHP

## 5. Family Homelessness, *cont.*

### Continue to Address the Gaps in the State's Safety Net

In the reporting year that ended in September 2012, City-assisted emergency housing programs aided 137 families with 408 members who were otherwise not eligible for State-funded emergency assistance. The City intends to sustain that policy to the best of its ability going forward.

In addition, the City is committed to developing an advocacy strategy for Boston families who are losing their rental assistance through the State-funded HomeBASE Program. Developed in July 2011, HomeBASE provides financial assistance that allows formerly homeless families to stay in their current home or to move into new housing. In FY14 (July 1, 2013 – June 30, 2014), 1,030 families will lose this rental assistance.

### The Goal for this issue is:

**To ensure that there is a safety net for Boston's families that are homeless but ineligible for State-assisted emergency shelter, and to ensure that families who are eligible for emergency assistance can access State-assisted emergency shelter.**

### **To achieve this goal, we will:**

- ➡ Identify Boston families that are ineligible for State assistance and who lack other housing options and provide them access to an emergency placement
- ➡ Work with the DHCD to ensure that families who are eligible for state-funded shelter are placed in a timely manner, utilizing presumptive eligibility to reduce the number of families who are eligible for emergency shelter, but are turned away

### **Achieving the goal will require the following partners:**

- ➡ The City of Boston's Emergency Shelter Commission
- ➡ Family shelter providers
- ➡ DHCD/Department of Transitional Assistance (DTA)
- ➡ Foundation and philanthropic communities to support these gap-filling services either through new funding or through greater flexibility in the use of their existing funding of family shelter providers



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## 6. Workforce Development

Enhancing access to employment through workforce development efforts is an essential component of the City's homeless strategy. It is critical for not only promoting long-term stability, but also for preventing recurring homelessness. The homeless have a unique set of challenges that are often not effectively met by many traditional workforce development programs.

Despite the reality that Federal support is expected to decline, the City will seek to expand access to appropriate educational and skill training, as well as to specialized employment services to better meet the needs of current and former homeless individuals and families. A special emphasis for this effort will target homeless and recently-homeless veterans whose work histories were interrupted through multiple deployments.

**The goal for this issue is:**

**To determine the unmet need of homeless individuals and families who seek appropriate education, training and specialized employment services by June 30, 2014, and subsequently work to close the gap of that unmet need through a coordinated effort to increase access to these services.**

### To achieve this goal, we will:

- ➞ Conduct a needs assessment of the number of homeless individuals and families who seek education, training and specialized employment services resources
- ➞ Determine the number of homeless individuals and families who annually access the existing resources for education, training and specialized employment services
- ➞ Conduct an inventory of existing resources and assess whether it fills the gap highlighted by the needs assessment
- ➞ Identify potential new or underutilized funding sources, and reposition existing ones that could be used to fund these service expansions
- ➞ Establish a coordinated service link between education, training, and workforce development programming with stabilization services and permanent housing

### Achieving this goal will require the following partners:

- ➞ Emergency shelter providers, homeless providers specializing in workforce development and permanent supportive housing providers
- ➞ City, State and Federally-funded job training providers
- ➞ Philanthropic and other alternative funding partners

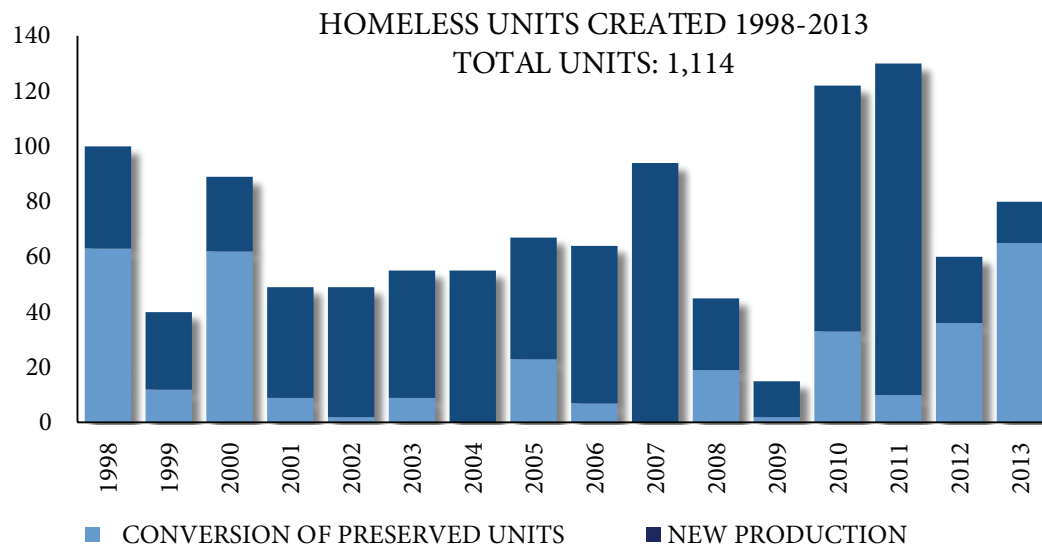


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## 7. Homeless Housing

### Homeless Housing Production

While the City's long-standing policy of setting aside 10% of all newly built units, and converting preserved affordable rental into housing for the homeless has created more than 1,100 units since its inception (see chart), declining Federal resources for housing are going to make it much harder to continue producing at these historic rates. In particular, Federal cutbacks to the Section 8 program, a key resource in many projects with homeless set-aside units, may require affordable housing developers to seek financing models to create homeless set-aside units if they are sustained.





**The goal for this issue is:**

**To maintain homeless housing production rates as close as possible to historic production rates of 75 units per year, creating 225 units through 2016.**

**To achieve this goal, we will:**

- ➡ Prioritize the funding and construction of the 135 set-aside units currently in the City's development pipeline
- ➡ Evaluate the production process with an eye toward more cost-effective methods of producing homeless housing
- ➡ Ensure that new units developed or preserved for homeless households have sufficient funds to provide appropriate levels of support services in order to maintain tenancies

**Achieving the goal will require the following partners:**

- ➡ Housing developers
- ➡ Foundation and Academic Institution support to identify and adapt best practices
- ➡ State, Federal and Philanthropic funding partners to develop new and more efficient, funding systems to support homeless housing production

## 7. Homeless Housing, *cont.*

### Homeless Set-aside Unit Turnover Rate

Many homeless units have been created by the City since the homeless set-aside policy began in 1997. Optimizing the utilization of this resource is increasingly important as other sources to create new units decline. In addition, many homeless households access units are in developments that are dependent on Project-based Section 8 funding.

Slow systems for reoccupying these units at turnover create extended vacancies and causes significant financial losses to the housing provider. Addressing these issues on a comprehensive basis will result in a better-run homeless set-aside portfolio, and financially stronger housing providers. Additionally, many homeless households access Program-Based Voucher (PBV) units over and above the number allocated as set-aside units.

**The goal for this issue is to:**

**Implement system-wide reforms to reduce the timeframe for refilling vacancies in Homeless Set-aside units.**

**To achieve this goal, we will:**

- ➡ Coordinate with the PBV Owner Screening Pilot, an effort led by Mass Housing Partnership consisting of BHA staff and PBV owners/property managers to reduce turnover time for filling vacancies in PBV units.

**Achieving this goal will require the following partners:**

- Members of the PBV Owner Screening Pilot including Mass Housing Partnership and the BHA
- Set-aside and homeless housing providers
- City, State and Federal agencies that administer other rent subsidy programs



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## Appendix 1: Sheltering Rates for 25 Largest Non-Rural Districts, 2012

### SHELTERING RATES FOR 25 LARGEST NON-RURAL CONTINUUM OF CARE DISTRICTS 2012

Continuum of Care District	Total Homeless 2012	Total Unsheltered 2012	Sheltering Rate
Boston CoC	5,607	193	96.6%
New York City CoC	56,672	3,262	94.2%
Philadelphia CoC	5,780	500	91.3%
District of Columbia CoC	6,954	679	90.2%
Metropolitan Denver Homeless Initiative	6,358	964	84.8%
Miami/Dade County CoC	3,976	868	78.2%
Chicago CoC	6,710	1,722	74.3%
Phoenix/Mesa/Maricopa County Regional CoC	6,485	1,749	73.0%
Seattle/King County CoC	8,899	2,618	70.6%
Honolulu CoC	4,353	1,318	69.7%
Atlanta/Roswell/DeKalb, Fulton Counties CoC	6,811	2,378	65.1%
Portland-Gresham-Multnomah County CoC	4,423	1,714	61.2%
Oakland/Alameda County CoC	4,257	2,212	48.0%
City of Houston/Harris County	7,187	3,824	46.8%
San Diego City and County CoC	10,013	5,642	43.7%
San Francisco CoC	5,895	3,371	42.8%
Santa Ana/Anaheim/Orange County CoC	7,010	4,272	39.1%
Las Vegas/Clark County CoC	8,752	5,670	35.2%
Los Angeles City & County CoC	42,353	28,540	32.6%
New Orleans/Jefferson Parish CoC	4,903	3,439	29.9%
San Jose/Santa Clara City & County CoC	7,053	5,169	26.7%
Riverside City & County CoC	6,096	5,090	16.5%
Fresno/Madera County CoC	4,492	3,822	14.9%
Tampa/Hillsborough County CoC	7,419	6,447	13.1%

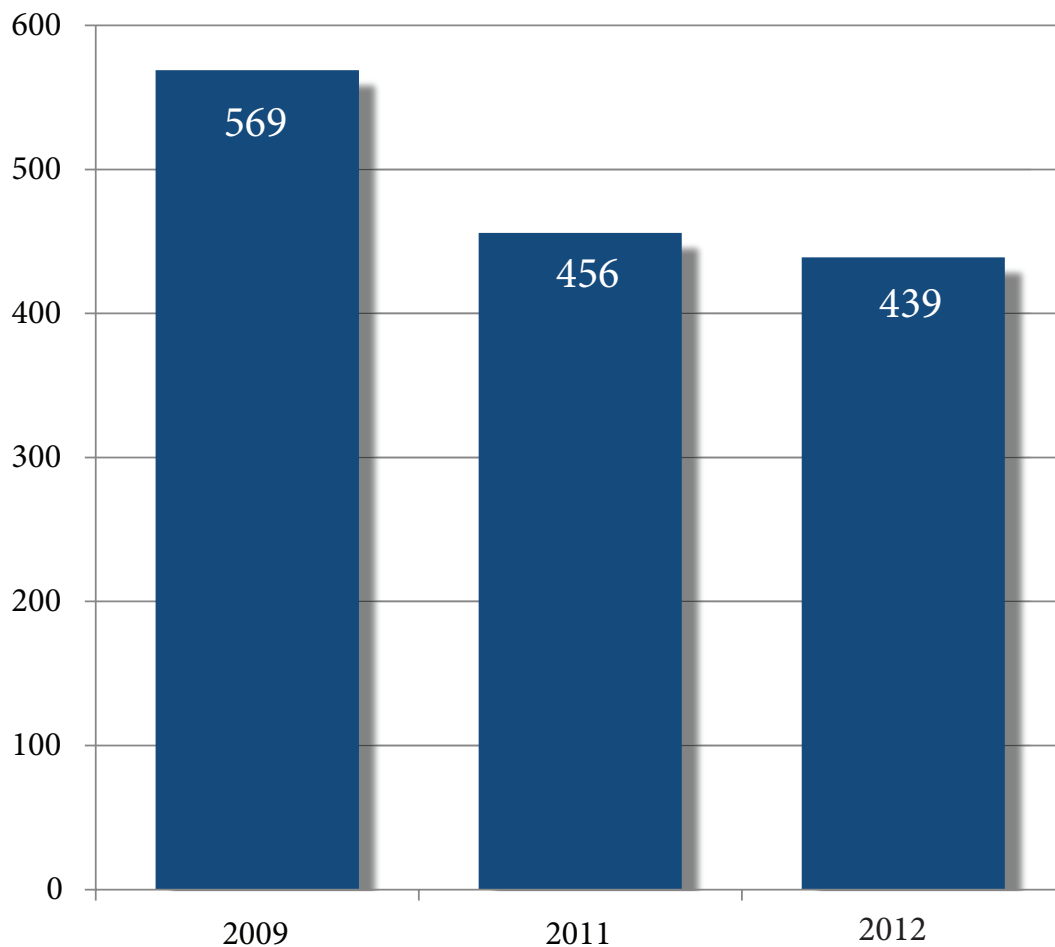
Source: U.S. Department of Housing and Urban Development



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## Appendix 2: Long-Term Homelessness in Boston 2009-2012\*

COUNT OF PERSONS IN EMERGENCY SHELTER  
FOR A YEAR OR MORE



\* Please note: data not collected for 2010.



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## Appendix 3: Housing Subsidies Secured for Homeless Individuals and Families

Total Number of Housing Subsidies Secured for Homeless Individuals and Families through HUD Continuum of Care Resources

Agency	Program	Total Subsidies for Homeless Individuals and Families	Number of Chronically Homeless Individuals Housed with these Subsidies
Bay Cove Human Services	Winston Road	6	6
Bay Cove Human Services	Home At Last	25	25
Heading Home	Homeless to Housing	10	10
Homestart	At Home	13	13
Homestart	Fresh Start	15	15
Homestart	New Lease	23	23
Homestart	New Neighbor	35	35
Homestart	The Apartment Connection	98	33
Homestart	Welcome Home	22	0
Kit Clark	Walnut	20	14
Latino Health	Walnut Park	6	6
Latino Health	Proyecto Opciones	13	3
MBHP	Families at Home	50	0
MBHP	Reach III	32	32
MHASA	Home and Healthy	35	35
MHASA	Home Front	15	15
Pine Street Inn	First Home	10	10
Pine Street Inn	Reach I	20	20
Pine Street Inn	Reach II	44	44
Pine Street Inn	Chronically Homeless Housing	18	18
Pine Street Inn	Hope to Home	20	20
Pine Street Inn	Long Term Stayers Housing	30	30
Pine Street Inn	Long Term Stayers Home	20	20
Project Place	Gatehouse SPC	10	3
Vinfen	MMHC Scattered site	8	4
<b>Total</b>		<b>598</b>	<b>434</b>







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